SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

16 X 17a 17b 17c 17d 18
19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) MS. CASSANDRA MARROQUIN Mailing Address 14300 SW 48TH LANE		Transaction ID : SA17.910010 Date of Receipt
		11 27 2015
City MIAMI	State Zip Code FL 33175-5050	CONTRIBUTION
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED	50.00
Receipt For: 2016 ✓ Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 340.00	
Full Name (Last, First, Middle Initial) MR. PAUL MARRONE JR.		Transaction ID : SA17.848913 Date of Receipt
Mailing Address 361 RIDGECREST AVENUE		10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City STATEN ISLAND	State Zip Code NY 10312-5133	CONTRIBUTION
FEC ID number of contributing federal political committee.	С	CONTRIBUTION Amount of Each Receipt this Period
Name of Employer NEW YORK STATE ASSEMBLY	Occupation ATTORNEY	250.00
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date 585.00	
Full Name (Last, First, Middle Initial) MR. PAUL MARRONE JR.		Transaction ID : SA17.903121 Date of Receipt
Mailing Address 361 RIDGECREST AVENUE		12 21 2015
City STATEN ISLAND	State Zip Code NY 10312-5133	CONTRIBUTION
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer NEW YORK STATE ASSEMBLY	Occupation ATTORNEY	250.00
Receipt For: 2016 ✓ Primary General Other (specify) ▼	Election Cycle-to-Date 585.00	
Subtotal Of Receipts This Page (optional)		
Subtotal Of Receipts This Page (opti	ionai)	